

| POSITION                  | INITIALS           | ID NO. | DATE     |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> |        | 00-05-01 |
| O.I.P.E. CLASSIFIER       |                    | 20     | 6/15     |
| FORMALITY REVIEW          | <i>[Signature]</i> | 213    | 07-31-01 |
| RESPONSE FORMALITY REVIEW |                    |        |          |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | ✓     | ✓        | 11/20/04 |
| 2     | ✓     | ✓        | 5/26/04  |
| 3     | ✓     | ✓        |          |
| 4     | ✓     | ✓        |          |
| 5     | ✓     | ✓        |          |
| 6     | ✓     | ✓        |          |
| 7     | ✓     | ✓        |          |
| 8     | ✓     | ✓        |          |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

530  
07-31-01

If more than 150 claims or 10 actions  
staple additional sheet here

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